Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | OR_ | OTHER SMALL E | |
|---|---|---|--------------------|---------------------|-------------------------------------|------------------|----------|---------------------|------------------------|----------------|---------------------|------------------------|
| TOTAL CLAIMS | | | 29 | | | | | RATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | <i>Q</i> minus 20= | | . 9 | | | X\$ 9= | | OR | X\$18= | 1602 |
| INDEPENDENT CLAIMS | | | minus 3 = | | * / | | | X40= | | OR | X80= | \$70 |
| MU | TIPLE DEPEND | DENT CLAIM P | RESENT | | | | | +135= | | OR | +270= | $ \times $ |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 452 |
| | | AIMS AS | | | (Column 3) |) | SMALL I | ENTITY | OR | OTHER SMALL | | |
| AMENDMENT A | 4 | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | HIGI NUN PREV | HEST MBER NOUSLY OFOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | 1 | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | | X40= | | OR | X80= | |
| <u> </u> | FIRST PRESE | NTATION OF M | MULTIPLE DEP | ENDEN | IT CLAIM | | ل | +135= | | OR | +270= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | | | ,ADDIT. I CE | |
| AMENDMENT B | A S | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | . 4 | HIG NU PREV | GHEST MBER /IOUSLY D FOR | PRESENT EXTRA | ٦ | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | | X40= | | OR | X80= | |
| | FIRST PRESE | NTATION OF N | MULTIPLE DEF | PINDE | VI CLAIM | | _ | +135= | | OR | +270= | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTA ADDIT. FE | |
| | | (Column 1) | | (Col | lumn 2)_ | (Column : | 3)_ | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMEN | | HIC NU PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | \perp | X\$ 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | NT OLAIN | = | \dashv | X40= | | OF | X80= | |
| IL. | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OF | +270= | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | TOTAL | | OF | TOTA | V. |
| : | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | |